Revised 03/06 WDNY

# UNITED STATES DISTRICT COURT WESTERN DISTRICT OF NEW YORK

# FORM TO BE USED IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

13010633F

(Prisoner Complaint Form)

All material filed in this Court is now available via the INTERNET. See Pro Se Privacy Notice for further information.

#### 1. CAPTION OF ACTION

A. Full Name And Prisoner Number of Plaintiff: NOTE: If more than one plaintiff files this action and seeks in forma pauperis status, each plaintiff must submit an in forma pauperis application and a signed Authorization or the only plaintiff to be
considered will be the plaintiff who filed an application and Authorization.  1. ANHON ROWNO (COASSO) FILED FILED
2. JUN 1 7 2013
B. Full Name(s) of Defendant(s) NOTE: Pursuant to Fed.R.Civ.P. 10(a), the names of all purities must up pear in the caption.  The court may not consider a claim against anyone not identified in this section as a defendant. If you have more than six defendants,
you may continue this section on another sheet of paper if you indicate below that you have done so.  1. Keyin with C.O. 4. Daniel Leonard C.O.
2. Joseph Clanci C.O. 5. Roy Bell C.O. 6. Gregory Carney C.O.
2. STATEMENT OF JURISDICTION
This is a civil action seeking relief and/or damages to defend and protect the rights guaranteed by the Constitution of the United States. This action is brought pursuant to 42 U.S.C. § 1983. The Court has jurisdiction over the action pursuant to 28 U.S.C. §§ 1331, 1343(3) and (4), and 2201.
3. PARTIES TO THIS ACTION
PLAINTIFF'S INFORMATION NOTE: To list additional plaintiffs, use this format on another sheet of paper.
Present Place of Confinement & Address: Carrespond Correctional
FACILITY BOXSI COMSTOCK, N.Y. 12821-0051
Name and Prisoner Number of Plaintiff:
Present Place of Confinement & Address:

<b>DEFENDANT'S INFORMATION</b> NOTE: To provide information about more defendants than there is room for here, use this format on another sheet of paper.
Name of Defendant: Kevin Wrich - C.O.
(If applicable) Official Position of Defendant: Correction OFFicer
(If applicable) Defendant is Sued in Individual and/or Official Capacity
Address of Defendant: ATTICA CORRECTIONAL FACILITY
Attica, N. 4. 14011-0149
Name of Defendant: SOSEPH CIANCI-C.O.
(If applicable) Official Position of Defendant: COrrection OFFice
(If applicable) Defendant is Sued in Individual and/or Official Capacity
Address of Defendant: ATTICA CORRECTIONAL FACILITY
ATTICA. N.Y. 14011-0149
Name of Defendant: GARY COVIETO C.O.
(If applicable) Official Position of Defendant: Correction OFFICE
(If applicable) Defendant is Sued inIndividual and/orOfficial Capacity
Address of Defendant: ATTICA COPPECTIONAL FACILITY
ATTICA N.Y. 14011-0149
4. PREVIOUS LAWSUITS IN STATE AND FEDERAL COURT
A. Have you begun any other lawsuits in state or federal court dealing with the same facts involved in this action?
Yes_V No
If Yes, complete the next section. NOTE: If you have brought more than one lawsuit dealing with the same facts as this
action, use this format to describe the other action(s) on another sheet of paper.
1. Name(s) of the parties to this other lawsuit:
Plaintiff(s): All Management of the Plaintiff(s): All Management of the Plaintiff(s) and the
Defendant(s): KENNETH HOWATTH - CO. WATTHEU
KARKOS-C.O. Michael, Suron-C.O.
2. Court (if federal court, name the district; if state court, name the county):
District Court SouthERN Unstrict of Newyork,
3. Docket or Index Number: 8 7 CV 8015 CS S
4. Name of Judge to whom case was assigned HONORAGE JEDS CAROFF

5. '	The approximate date the action was filed: April 19, 1986
6.	What was the disposition of the case?
	Is it still pending? YesNo
	If not, give the approximate date it was resolved. WHY 3003
	Disposition (check the statements which apply):
	<u>Dismissed</u> (check the box which indicates why it was dismissed):
	By court <i>sua sponte</i> as frivolous, malicious or for failing to state a claim upon which relief can be granted;
	By court for failure to exhaust administrative remedies;
	By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
	By court due to your voluntary withdrawal of claim;
	Judgment upon motion or after trial entered for
	plaintiff
	defendant.
If Yes	Yes No
1.	Name(s) of the parties to this other lawsuit:
	Plaintiff(s):
	Defendant(s):
2.	District Court:
3.	Docket Number:
4.	Name of District or Magistrate Judge to whom case was assigned:
5.	The approximate date the action was filed:
6.	What was the disposition of the case?
	Is it still pending? Yes No
	If not, give the approximate date it was resolved.

•	Disposition (check the statements which apply):
	<u>Dismissed</u> (check the box which indicates why it was dismissed):
	By court <i>sua sponte</i> as frivolous, malicious or for failing to state a claim upon which relief can be granted;
	By court for failure to exhaust administrative remedies;
	By court for failure to prosecute, pay filing fee or otherwise respond to a court order;
	By court due to your voluntary withdrawal of claim;
	Judgment upon motion or after trial entered for
	plaintiff
	defendant.

#### 5. STATEMENT OF CLAIM

For your information, the following is a list of some of the most frequently raised grounds for relief in proceedings under 42 U.S.C. § 1983. (This list does not include <u>all</u> possible claims.)

- Religion
- Access to the Courts
- Search & Seizure

- Free Speech
- False Arrest
- Malicious Prosecution

- Due Process
- Excessive Force
- Denial of Medical Treatment

- Equal Protection
- Failure to Protect
- Right to Counsel

Please note that it is not enough to just list the ground(s) for your action. You must include a statement of the facts which you believe support each of your claims. In other words, tell the story of what happened to you but do not use legal jargon.

Fed.R.Civ.P. 8(a) states that a pleading must contain "a short and plain statement of the claim showing that the pleader is entitled to relief." "The function of pleadings under the Federal Rules is to give fair notice of the claim asserted. Fair notice is that which will enable the adverse party to answer and prepare for trial, allow the application of res judicata, and identify the nature of the case so it may be assigned the proper form of trial." Simmons v. Abruzzo, 49 F.3d 83, 86 (2d Cir. 1995). Fed.R.Civ.P. 10(b) states that "[a]ll averments of claim ... shall be made in numbered paragraphs, the contents of each of which shall be limited as far a practicable to a single set of circumstances."

#### **Exhaustion of Administrative Remedies**

Note that according to 42 U.S.C. § 1997e(a), "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prison er confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

You must <u>provide information</u> about the extent of your efforts to grieve, appeal, or otherwise exhaust your administrative remedies, and you must <u>attach copies</u> of any decisions or other documents which indicate that you have exhausted your remedies for <u>each</u> claim you assert in this action.

A. FIRST CLAIM: On (date of the incident) Febuary 17, 3-6.11
defendant (give the name and position held of each defendant involved in this incident)
WRICH, A JOSEPH CTANCI-C.O. GARY COVIEW
C.O. SANIEL LEONARCE, C.O. ROM BELL, C.O
did the following to me (briefly state what each defendant named above did):
THELABOVE STAKEN TURNS PUNCHTUG ME IN
MY FACE / FACIACISEVERAL TIMES WHO IN
PARTHAD GUID (ME) 4- LACERATIONS TO
MY FACE, A BLACK ANCE BLUE RIGHT EYE,
AS WELL AS A BROKEN LIGHT CHEEK BOUT
IS FRACTURED STIVI. AI(10) OFFICERS TAKEN
TURNS KICKING & STOPPMED ON BOCKY PARTS.
The constitutional basis for this claim under 42 U.S.C. § 1983 is: EGATAMENDMENT
Cruel & unusual Puwishment,
The relief I am seeking for this claim is (briefly state the relief sought): TOR COMPENSALORY
PUNITIVE DAMAGES, FOR AN MY SUFFERING OF
PHYSICALENJUNES, IN THE AMOUNT OF (1,000.000)
Exhaustion of Your Administrative Remedies for this Claim:
Did you grieve or appeal this claim? Yes No If yes, what was the result?
AFTER BEING ASSAULTED IT WAS SENT TO A DSYCHIATRIC HOSPIN
Did you appeal that decision? Yes No If yes, what was the result?
I BRUCK BLAUST MY Remedies in a psychiatric H-Spitale
Attach copies of any documents that indicate that you have exhausted this claim.
If you did not exhaust your administrative remedies, state why you did not do so:
Ethanst All my remedies But I WASSTILL DENIED 12
ENTER THE GREVANCE DEPARTMENT & A (MENTAL-PATIENT).
A. SECOND CLAIM: On (date of the incident) Febuary 17, 201
defendant (give the <u>name and position held</u> of <u>each defendant</u> involved in this incident)
C.O. SOSEPH CUTNCE, C.O. OTTRY COVIEWS
C. (). WANTEL LEONARCE, C.O. RORY BELL, C.O.

did the following to me (briefly state what each defendant named above did):
10) COLLECTION-OFFICERS HAD TAKEN/TURNS)-
DHUNHING ME IN MY FACE/FACIAL SEVERAL-
TIMES, WHO IN DARTHAD GWINME) 4.
LACERATIONS TO MY FACE, A BLACK O BLUE
RIGHT EYE, AS WEVIAS & BROKEN RIGHT CHEEK-
PUNE STILLERACTURED). ALL(10) COLLECTION -
OFFICERS TAKENTUMS ) KICKING & STOPPING KOCKIPANS
The constitutional basis for this claim under 42 U.S.C. § 1983 is: Wy to the constitutional basis for this claim under 42 U.S.C. § 1983 is:
Cruel & UNUSUAL PUNISAMENTOUSE OF Etcessive Force.
The relief I am seeking for this claim is (briefly state the relief sought): Tor Compensation
PUNITIVE DAMAGES, FOR All My SUFFERIUG OF-
PHYSICAL INJULIES, (MSE OF EXCESSIVE FORCE).
Exhaustion of Your Administrative Remedies for this Claim:
Did you grieve or appeal this claim? Yes No If yes, what was the result?
AFTER BEING (ASSAUTTED) I WAS SENT TO PSYCHIATRE HAPPIN
Did you appeal that decision? Yes No If yes, what was the result?
I (CANNOT) Ethans + my REMERIES IN A PSYCHATOR HOSPITAL
Attach copies of any documents that indicate that you have exhausted this claim.
If you did not exhaust your administrative remedies, state why you did not do so:
Exhaust my remedies I EDIELES THE ORIEUANCE TO
If you have additional claims, use the above format and set them out on additional sheets of paper.
Summarize the relief requested by you in each statement of claim above.
Amount of and and An Mark
SUFFERING DISCOCK TO TAKE MENTAL AWOUNGS
and the state of t
WESTAMMHAICSTES VSISORIEG PET MANERI-DISHOLITYS.
If you did not exhaust your administrative remedies, state why you did not do so: THE TOPIEUANCE TO LATE.

I declare under penalty of perjury that the foregoing is true and correct.
Executed on MAY 24, 2013 (date)
NOTE: Each plaintiff must sign this complaint and must also sign all subsequent papers filed with the Court.
Anthony Romano
(OOA535)
Signature(s) of Plaintiff(s)

DEFENDANTS INFORMATION NOTE
HAME of Defendant DANIELLEONARD C.O. If Applicable JOFFICIAL POSITION OF DEFENDIONIT CORRECTION OF FICER
If Applicable Defendant is Scheol in Anthory Address of Defendant ATTICA CORREctional FACILITY
Address of Deterdant ATTICA CORREctional FACILITY ATTICA, N.Y. 14011-0149
VAME OF DEFENDANT ROY BELL C.O.  If Applicable YOFFICIAL POSITION OF DEFENCIONAL OFFICER
It Applicable Detendant is Succl in OFFICIAL
Address of Defendant Attica, CorrectionAC FACILITY ATTICA, N.Y. 14011-0149
NAME OF DEFENDANT GREGORY CARNEY C.C.  If Applicable OFFICIAL POSTION OF DEFENDANT  CORRECTION OFFICER
It applicable Defendant is Suecl in webuilded and for OFFICIAL Acidity CAPACITY CAPACITY FILLOW CORRECTIONAL FACILITY  ATTICA, N.Y. 14011-0149
ATTICA, N.Y. 14011-0149

DEFENDANTS INFORMATION NOTE
NAME OF DEFENCIANT SEFFREY HAZAROL C.O. (If Applicable) OFFICIAL POSTION OF DEFENCIANT CORRECTION OFFICER
(If Applicable) Defendant is Suece Inclintedual ancelor OFFICIAL Address of Defendant Attica, Correctional EACILITY
ATTICA, 1N.4. 14011-0149
NAME OF DEFENCIANT BRIAN FEENEY (If Applicable OFFICIAL POSTION OF DEFENCIANT CORRECTION OFFICER
CIF Applicable Defendant is Sweel Inclinical and for OFFICIAL Address of Defendant Attica, correctional FACILITY
ATTICA, N.Y. 14011-0149
NAME OF DEFENCIANT SETFREY LA CAPRUCCIA I SUPPLICABLE OFFICIAL POSTION OF DEFENCIONS CORRECTION OFFICER  (TEL ADDITION OF DEFENCION SERVICION SE
CIFAPPLICABLE DESENDENT IS SUECL INCLIDIQUAL ANCELOR OFFICIAL ACICLOS OF DEFENCION FACILITY. CAPACITY GORRECTIONAL FACILITY.
ATTICA, N.Y. 14011-0149

DEFENDANTS INFORMATION NOTE
NAME OF DEFENDANT SEFFREY MINER C.O. CIE Applicable OFFICIAL POSTION OF DEFENDANT CORRECTOR OFFICER
(It Applicable) Deterchant is succe in I relivictual ancefor of official
Address of Defendant Attica, Correctional FACILITY. Aftical N.y. 14011-0149
NAME OF DE CONNIT MARK CUNNINGHAM
CIF Applicable OFFICIAL POSTION OF DEFENCIANT (SERGERNT) SGF, CIF Applicable Defencion is Sueclin (Notwolf and for official CAPACITY)
Address of Defendant Attica, Correctional FACILITY ATTICA, N.Y. 14011-0149

A. FIRST CLAIM ON COLOTE OF the INCICLENT FEBRUARY 17, 2010  Clefendant Give the Name And position held of each defendant involved in this inciclen GREGORY CARNEY- C.O. JEFFREY-HAZARD FEENEY, C.O. SEFFREY-HAZARD C.O. SEFFREY LA CAPRICCIA, C.O. SEFFREY WILLER-C.O. SEFFREY SERGEANT-MARK CUNNINGHAM SGT;	1-
	***************************************

A. SECOND CLAIM: ON COLATE of the Incident February 17, 2011  Defendant Give the Name and Position held of each defendant involved in this Incident) OREGORY CARNEY, C.O. JEFFREY-HAZARCL, C.O. RHAN FEFNEY, C.O. SEFFREY LA CAPRUCCIA, C.O. SEFFREY WILLER, C.O. SEFFREY WILLER, C.O. SEFFREY WILLER, C.O. SEFFREY WILLER, C.O.

# Ethaustion OF your Administrative Remedies For this Claim ONLY NEED TO TELL THE COURTS PON ETHOUST REMEDIES ARE THE FOLLOWING REASONS WHY? TER HAE/ASSAU NS (PEnoclos TRUED CATER FERIUS, MENTA DEPRESSED, PTSD,

PART OF MY MOTION ON BEHAIF OF MY \$1983 42 U.S.C. CIVIC- RIGHTS ACTION SEEK LETTER TO CIVIL-COURTS.
ON DAPUARY 12 7012 A WY. ORTIZ HAD COME TO VISIT WE ON BEHALF OF THIS I HCIDENT (USE OF EXCESSIVE FORCE) ASSAULT BY CORRECTIONAL OFFICERS THAT TAKEN PLACE IN ATTICA CORRECTIONAL FACILITY HE WAR FROM THE I NSPECTORS GENERALS OFFICE ONLY TO I NUESTIGATE THIS I NOIDENT WHILE HERE IN
SO THE I USPECTOR GEREVAL DID
COME VISIT ME FOR MY PROOF by HEM BUT HELD. G. HAD NEVER GOTTED BACK TO ME ON THIS MATTERS ON JANUARY 12,2012, HERE WHILE AT COMSTOCK. JUST TO BRING HAIS TO THE COURTS- ATTENTION I ONLY ASSUME HHERE WAS SOME KIND OF INVESTIGATION ON MY BEHALF FROM I G. THEMSELVES.
CCIFILE RESPECTFULLY ROMANO OOAS357 ANTHONYROMANO (OOAS357) (OOAS357)

#### Case 1:13-cv-00633-EAW-HBS Document 1 Filed 06/17/13 Page 15 of 25

STATE OF NEW YORK DEPARTMENT OF	Grievance Number A-57680-10	Desig_/Code I/44	Date Filed 12/6/10		
CORRECTIONAL SERVICES	Associated Cases				
To the second se	Attica Correctional Facility				
INMATE GRIEVANCE PROGRAM	Title of Grievance Grievances Not Filed				
CENTRAL OFFICE REVIEW COMMITTEE					

3/2/11

#### GRIEVANT'S REQUEST UNANIMOUSLY ACCEPTED IN PART

Upon full hearing of the facts and circumstances in the instant case, the action requested herein is hereby accepted in part.

CORC notes that a review of the Clerk's log indicates that none of the six grievances listed by the grievant were received or processed by the IGRC. There are, however, six grievances logged from him between 8/27/10 and 11/17/10, and the IGP Supervisor provided him with the status of these grievances on 12/6/10. The IGP Supervisor reports that all the grievances have been responded to, and all answers have been forwarded to him. There is no indication that his grievances have been consolidated.

With regard to the grievant's appeal, CORC has not been presented with sufficient evidence to substantiate any malfeasance by IGRC staff, or that his grievances are not being filed. CORC advises him to address any further concerns regarding the status of his grievances to the IGP Supervisor for the most expeditious means of resolution. CORC notes that Directive #4040, Section 701.1, states, in part, that the grievance program is not intended to support an adversary process.

RCE/sl	ŝ				





INMATE GRIEVANCE PROGRAM

TO:

A. Romano, 00A5352, Marcy CNYPC

FROM:

George D. Struebel, IGP Supervisor

SUBJ:

**Your attempted Grievance** 

DATE:

5/19/11

Your attempted grievance cannot be accepted and is being returned to you for the following reasons;

- 1. Grievances must be filed within 45 days of the grieved event. Your event happened over 90 days ago.
- 2. Grievances cannot be filed in a facility in which you do not house; you are no longer housed in Attica C. F.
- 3. You are currently not even in the custody of the Department of Correctional and Community Servives; you are in the custody of the NYS Mental Health Department. As such, you cannot file grievances with this department.

INMATE GRIEVANCE PROGRAM

TO: A. Romano, 00A5352, Marcy CNYPC

FROM: George D. Struebel, IGP Supervisor

SUBJ: Your letter of %/24/11

**DATE:** 5/31/11

I refer you to my memo of 5/19/11. You cannot file a grievance in this facility; you do not reside here. You cannot file a grievance on situations from months ago; there is 45 day time restriction. You cannot file a grievance on a claim decision; appeal the claim.

#### INMATE GRIEVANCE PROGRAM

A. D. Henlad

TO:

A. Romano, 00A5352, CNYPC

FROM:

George D. Struebel, IGP Supervisor Your 5/31/leet to Supt. Bradt.

SUBJ:

DATE:

6/3/11

The above has been referred to me for response. I refer you to my memos to you of 5/31 and 5/19. there is no exception to this restriction.

INMATE GRIEVANCE PROGRAM

TO:

A. Romano, 00A5352, Cnypc

FROM:

George D. Struebel, IGP Supervisor

SUBJ:

Your correspondence received today

DATE:

6/10/11

I have responded to you on this matter previously. I refer you to my memos to you of 5/19/11, 5/31/11, and 6/3/11. The answer has not changed and will not change.

### STATE OF NEW YORK-DEPARTMENT OF CORRECTIONAL SERVICE

#### ATTICA CORRECTIONAL FACILITY

FROM: SANDRA PRUSAK, INMATE RECORDS COORDINATOR II  SUBJECT: FREEDOM OF INFORMATION LAW-FOIL REQUEST	
SUBJECT: FREEDOM OF INFORMATION LAW-FOIL REQUEST	
<b>DATE:</b> August 1, 2011	
1. This is to acknowledge receipt of your request under Freedom of Information.  Said request is being reviewed and you will be notified of the results of this  Review	
2. A review of your records indicate the documents you requested will require a fee of \$.50. The photocopying fee is \$.25 per page. Upon receipt of your signed Disbursement form stamped by your Hall Captain, the records that you requested will be forwarded to you.	
<ul> <li>4. Your sentencing minutes and/or certificate of conviction are not contained in your central file, you must write to the court in the county in which you were sentenced to request it from them.</li> <li></li></ul>	fice.
Counsel's Office, Building 2 1220 Washington Ave. Albany, NY 12226.  sp: lp cc: File	

## Office of the Superintendent

# MEMO

То:	Romano OSA 5352 CNYPC NAME DIN CELL
From:	Mark L. Bradt, Superintendent
Date:	7-29-11
Subject:	Inmate Note Dated 7-20-11 Received on 7-29-11
	Your complaint has been received. The Inmate Grievance Program (per Directive 4040) handles allegations of harassment or unlawful discrimination, therefore, your letter is being forwarded to the Inmate Grievance Office for processing.
	I am investigating your letter and as soon as I have sufficient information, I will reply.
	Your letter has been referred to the below-named person. Any further correspondence on this matter should be referred to this person.
,	Your grievance/letter has been referred to the below-named person. Any further correspondence on this matter should be referred to this person.
	Your time cut request has been referred to the Deputy Superintendent for Security for response.
	Your marriage request has been referred to the Deputy Superintendent for Programs for processing and response.
MLB.bcm	Capt Brown
file	

## Attica Correctional Facility Memorandum

TO:

A. Romano, 00a5352, Great Meadow ICP

From:

Mr. Janes, IGPS

Subject:

Your attempted grievance

Date:

November 09, 2011

Regarding your attempted grievance; it is being returned to you. We can NOT file it. Grievances must be filed at the facility that you are currently housed in. You are not an inmate at this facility. Additionally, it is well beyond time frames for filing. A grievance must be filed within 21 days of an alleged incident. The IGP Supervisor may grant an exception to the time limit based on mitigating circumstances. An exception to the time limit may NOT be granted more than 45 days after an alleged occurrence. This complaint is also well beyond time limits even when considering mitigating circumstances. If you have any questions please refer to directive 4040. Again, the Attica Inmate Grievance Program can not file your attempted grievance and it is being returned to you.

CC: Supt. M. Bradt

IGPS Great Meadow C.F.

I am filing This grievance exercising MY guaranteed and Protected rights under The Constitution of The United States of America.

First Amendment (freedom of Speech and, The right to redress MY Grievances) due to The fact That MY Constitutional rights have been Violated and, are not time barred by Correctional Standards. Under the fourteenth Amendment, MY right to the (due Process of the law and, The equal Protection of the law) are to be Protected and, his is why Mr. \_\_\_\_\_ I resubmit this gricvance asking that MY guaranteed rights be Protected. On Feb. 17 2011 MY eighth Amendment right was violated when I was assuited by Staff at Attich Facility.

I know That I am not currently being held by (DOCS) at The Present Time, but, you and I know That I will be returned to (DOCS) one day in The near future.

I fear for my life and safety, and This is Why I now file This Grievance.

#### AFFIDAVIT OF SERVICE

STATE OF NEW YORK ) ) ss.:
COUNTY OF WASHINGTON )
I, ANTHONY ROMANO, being duly sworn, depose and say
that on the 12, day of JUNE, 20013,
Petitioner/Defendant/Claimant, served upon the defendant/
respondent the annexed document(s) identified as:
Motion to U.S. District upon the following party:
Count Western Dristrict OF Newyork
\$1983 42 U.S.C.
CIVIL-RIGHTS Action,
by placing the same in the mailbox at the Great Meadow Correctional
Facility, under the exclusive care and custody of the United
States Postal Service, by regular first class mail/certified
return receipt mail/ other.
LIND O
Alla Kemera
Sworn to before me this
12 day of Jone, 2013.
JAMES M. TERRIO
No. 01TE6217805  NO. ARY PUBLIC Qualified in Washington County
My Commission Expires February 22, 2014

# UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT

**CERTIFICATE** 

U.S.C.A. Docket No.

ANTHONY ROMANO (OOA535)	OF SERVICE
V. Case Caption  EUIN WRICH, SOSEPH CIANCE  AND COVIEND, DANIEL LEONARD  OF BELL, GREGORY CARNEY,  I. ANTHONY ROMANO  NAME  of perjury that on the Ay day of May  served by United States Mail or hand del  \$1983 42 U.S.C. C.VIL-  (NAME OF DOCUMENT: Motion,	SETTREY MILLER, SETTREY MILLER, MARK CUNNINGHAM, SETGER hereby certify under the penalty  MAY  ONTH  YEAR  ivery the MOTION,  PIGHTS ACTION
on the following:  (1.S. Dastact Court  Western Dastact  OF New York  200 U.S. Courthouse  2 Niagara Square  Buttalo, N.Y. 14202.  Address	ANTHONY ROMANO NAME STEAT WEADOW COM FACTLITY, ROTSI COMSTOCK, N.Y. 12821- 0051